

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SEARCH NO. 101054386 FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1				
2				
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50				
TOTAL IND.	1			
TOTAL DEP.	12			
TOTAL CLAIMS	13			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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99								
100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS	13							

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. GOVERNMENT PRINTING OFFICE: 1964 7-1250